

# *To the Chairman and Members of the Northampton Rural District Council.*

JANUARY, 1909.

GENTLEMEN,

I beg to present my Report with the usual tables for the year 1908. I have again assumed the population of the district to be the same as in the previous years since the last census; there have been a few houses built at Duston, but this is the only village in which any building is going on: therefore as the last census showed a slight decline, building operations here are, I consider, only just sufficient to counterbalance this.

The total number of births during the year was 133, exactly the same number as in the year 1905. In 1906 there were 127 births, and in 1907 only 107, but these years were remarkable for their small number of births, and excepting these two years the present is the smallest number of births during the last ten years. The birth rate per 1000 works out at 21, whilst the average for the last ten years is 23·4, so that the birth rate is still below the average. Of these births 57 were males and 76 females.

The total number of deaths in children under one year of age was 11. In the two previous years there were only six such deaths, but this is a remarkably small number, and it is curious that with such a small number of births in these years there should have been such a greatly lessened mortality. Leaving these two years out of consideration, the present is the least number of such deaths during the last ten years; thus whilst the mortality per 1000 births for the ten years averages 99·6, the ratio for the present year is only 82·7. Of these eleven deaths, six were due to atrophy or premature birth, four were due to diarrhœa, and one to whooping cough. The deaths from diarrhœa were spread evenly over the three sub-divisions of the district, so were not due to any epidemic, but probably arose, as they so frequently do, from improper feeding.

The total number of deaths at all ages for the whole district was 167, giving a ratio per 1000 of 22·6. Of these deaths, however, 91 occurred in Berry Wood Asylum among non-residents, so that deducting these we find there were 76 deaths of residents in the district, with a ratio per 1000 of 14. This is a larger number of deaths than has occurred during the previous three years, but compares fairly well with some other years; the mean mortality for the previous ten years working out at 12·5 per 1000.

Table II. compares the births and deaths in the three sub-divisions of the District during the present year and during the last ten years. The births in the Duston division were just on the average; in the Weston Favell district they were the highest for the last five years, but still not quite up to the average; and the average is not quite reached in the Kislingbury district, though there were 78 births, or 20 more than 1907, when the births were exceedingly few. The deaths in the Weston Favell district were slightly below the average, in the Duston district much above the average, and in Kislingbury district slightly above the average.

Table III. shows the cases of infectious disease notified during the year. There was a total number of 31 cases, which is rather high; but 23 of these were cases of scarlet fever, and several of these occurred in the same family: thus four families had each of them three of their number down at the same time with this disease, whilst in other families two were affected. The following are the number of notifications during the last eight years:—

1900	...	...	...	...	12 cases.
1901	...	...	...	...	21 „
1902	...	...	...	...	30 „
1903	...	...	...	...	21 „
1904	...	...	...	...	103 „
1905	...	...	...	...	76 „
1906	...	...	...	...	13 „
1907	...	...	...	...	16 „
1908	...	...	...	...	31 „

Of the scarlet fever cases 14 were notified from Duston, and all during the months of October and November. Four families were attacked within a fortnight, several members of each family falling, and in each case the first member to fall could be traced to the infant department at Duston school. Here there were other children at school from St. James' End, Northampton, and there was a probable history of contact with cases of scarlet fever in that district, where the disease has lately been very prevalent. I ordered the infant department to be closed and the epidemic ceased at once. This department has only just been re-opened, and I have made a strong protest against children from St. James' End being admitted to Duston School. I am, however, told that by the rules of the Education Department such children cannot be excluded. If such is the case, it is a most mischievous and dangerous rule. For the last twenty years either Dallington or Duston Schools have had, one or other, almost yearly to be closed on account of children from the town introducing infectious disease into them, and what deaths can be traced to this source it would be difficult to say. It is rather a parody on the present day method of the Education Department that the height, weight and number of teeth of these children must be accurately recorded, whilst no steps are taken to prevent such a dangerous source of infection as at present admittedly exists. To still more emphasize this view, two children in one family at New Duston were attacked with scarlet fever, and the first to fall had been attending St. James' End School, where it evidently contracted the disease, as no other families in New Duston were affected.

In Harpole there were five cases of scarlet fever in two families. One family had been visiting friends at Duston when the epidemic was at its height, but it was difficult to trace the source of contagion in the other family, as they had not been out of the village, neither had they been to school or visited the other children. Two cases occurred at Billing, the first case being brought into the village by visitors from a distance, it fortunately only spread to one other family, though at the time I feared it would spread considerably, as the disease was not recognized and properly isolated till it seemed almost too late to be of service; of the other two cases one occurred at Weston Mill, and its origin was difficult to trace; the other broke out at the Convalescent Home Lodge, and may have been introduced by visitors from the town, it was isolated carefully at home, and there was no spread. All these cases were treated at their own homes, except one which was removed to the Borough Hospital by a fortunate mistake, as it broke out in a house close to the Borough boundary and was at first thought to belong to the Borough.

Three cases of diphtheria were notified in Duston village at different periods. In each case faults could be found with the sanitary arrangements of the house, which were immediately remedied and there was no spread of the disease.

One case of puerperal fever was reported from Harpole, which was unfortunately fatal. Its origin was difficult to trace, as the midwife who attended the case was visited, and seemed to have scrupulously carried out her rules as to disinfection, &c., nor did she carry the disease to any other of her patients. Proper precautionary methods of disinfection were carried out.

No cases of enteric fever or small pox were notified during the year.

There was one fatal case of influenza, and five fatal cases of whooping cough in Duston and Kislingbury districts.

The only fatal cases of diarrhoea were the four fatal cases in infants under one year of age which have been already spoken of.

There were seven deaths from different forms of tuberculosis in persons between 25 and 65 years of age, and seven deaths from cancer, mostly in old people. There were only six deaths from bronchitis, and none from other pulmonary diseases; this is rather a small proportion as there were twelve deaths from these causes last year.

The sewage schemes in the various villages where they have been installed have been working well and there have been no complaints. Since the ventilators have been erected in Duston the smells have much decreased, but a large part of the new district has not yet been taken over by your Authority, and before this is done much improvement will have to be made in the sewage system now existing there.



The water supply at Kislingbury and Lower Heyford is good and adequate, only a few minor repairs have had to be carried out, though frost has occasionally been rather troublesome. The town water supply is supplied to Duston, and gradually more of the houses are being connected with the mains; the flushing tank erected at the top end of the village is also working well. On account of the impure state of the wells at three houses at Weston Favell and also in two yards, arrangements have been made with the Northampton Authorities, and they have carried their mains round the village. The three houses named have already been connected and the two yards will be so immediately.

Two new houses have been built at Kislingbury and two old ones have been demolished.

Four fresh dairies were registered during the year, and two have been removed from the register as they have relinquished the business, so that there are now 32 on the register. They are all regularly inspected, and if minor faults have to be remedied they are at once done when any complaint is made. There has never been any difficulty in carrying out the Act.

The one small factory at Kislingbury is visited monthly, and the workshops are inspected every other month; very few complaints have had to be made, and in every case when a defect has been notified it has been at once remedied.

The bakehouses are clean and regularly whitewashed; there are no underground bakehouses.

I am, Gentlemen,

Yours truly,

G. H. PERCIVAL, M.B.,

Medical Officer of Health.

